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No. 2.

CASE OF TÆNIA EXPELLED BY KOUSSO.

[Communicated for the Boston Medical and Surgical Journal.]

NOVEMBER 26th, 1852.—J. H., æt. 14, English, rather tall for his age, slim, of dark complexion. His family are not known to be subject to tænia. Brothers and sisters occasionally pass, and are troubled by, ascarides. First aware of having a tape-worm in 1847, since when discharges of it have, from time to time, occurred, sometimes after taking oil of turpentine, and sometimes without the administration of any medicine. I have had in my possession several yards of the tape-worm evacuated a year or two ago. Subject to occasional attacks of violent abdominal pain, after which he has generally passed a portion of the worm. The discharge, however, is not always preceded by these symptoms, though always by *some* symptoms; as headache and sense of fatigue. His appetite is irregular, and his head frequently affected. Has been prevented by general debility and languor, and occasional distress, attributed to the disturbance caused by the tape-worm, from commencing an apprenticeship, to which his parents have been desirous of binding him.

About three months ago, the patient was attacked with wild delirium, accompanied with loud outcries, the symptoms continuing for a day or two, and being soon followed by the passage of a large portion of the tænia. Since then the patient is reported to have appeared heavy and stupid, pieces of the worm being still occasionally voided.

Now (about 10, A.M., Nov. 26th) the administration of koussou having been resolved upon, the patient is directed to take an ounce of sulphate of magnesia, living on thin porridge, during the day. To take nothing after rising, tomorrow, till my visit.

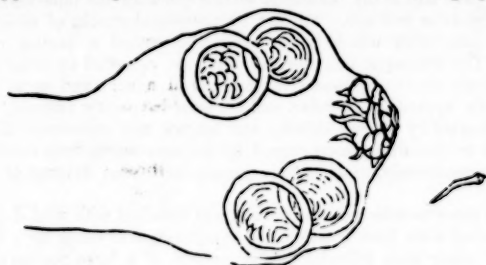
27th, 9½, A.M.—Three copious dejections yesterday, in one of which the patient saw a small piece of the worm. Has had no pain, except during the operation of the cathartic. Has, now, just risen, having ingested nothing to-day. To take at once an ounce of lemonade.

10½, A.M.—Infusion of koussou administered, preceded and followed by the imbibition of about an ounce of lemonade. The drug was given in a dose of three drachms and fifteen grains, accurate weight, although half an ounce was the quantity written for. The koussou, in powder, was stirred with cold water till a thick paste was formed, when about

twelve ounces of hot water were added, the whole being allowed to stand for twenty-five minutes before being administered. A dejection took place in about twenty minutes, containing a few broad joints of the tania. A second dejection followed in about five minutes after, with a large piece of the broader portion of the worm. A third dejection occurred in five minutes more, with a large portion of the reptile, including the neck. At 2, P.M., there was a fourth dejection, containing a few joints. *No pain* attended the action of the medicine.

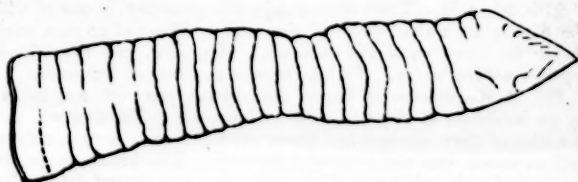
At 2, P.M., having carried home the portion of worm discharged, it was found to measure fifty-five inches, without the portion attached to the head, which was not then discovered. It gradually tapered from about the one third of an inch to a line in width. Then its breadth rapidly diminished to half a line, for the space of about four inches of its length, when it was found to have been broken off. Some alcohol being poured upon the reptile, a considerable movement took place.

On a subsequent examination, after the immersion of the worm in alcohol, a slender filament, about a third of a line in width, was found wound around the broad joint, and proved to be a piece of the neck, about an inch and a half in length, with the head attached. The head was hemispherical, or pear-shaped, and, to the naked eye, of the size and appearance depicted in the smaller of the two following figures.



Its appearance is given, as magnified by a low power, and projected in outline by a camera lucida.

The figure below represents the neck, as seen magnified a short distance from the head.



28th.—Slept well ; appetite good ; more cheerful. No dejection since 2, P.M. yesterday. Take an ounce of sulphate of magnesia.

30th.—Salts operated well. No pieces of the worm were discharged. Reports himself free from morbid symptoms.

December 23d.—The patient is at school, and is reported to have been well, in all respects, since last visit.

In a paper by Blanchard, in the "*Annales des Sciences Naturelles*," the circular objects on the head were described as "*Ventouses*," or "*suckers*." In Blanchard's plate, on account probably of the original object being less compressed than my specimen, two, only, of the suckers are visible, and those are more prominent than in the representation here given.

These "*ventouses*" are described, in the monograph referred to, as having behind them cavities communicating with longitudinal canals extending the whole length of the worm, along its borders.

Blanchard describes and illustrates by figures, distinct circulatory, digestive and reproductive systems. But as his views are not generally received, I forbear further quotation from his paper.

In some highly interesting remarks at a late meeting of the Boston Society for Medical Observation, Dr. Dalton spoke of some experiments lately made by Prof. Siebold, in relation to the development of the tape-worm.

Siebold, struck with the resemblance between the head of the cysticercus and that of the tænia, devised and carried out a series of experiments, most ingenious in their conception, and conclusive in their results. This resemblance is so strong, that if the head of the tænia, represented in the above cut, were made to terminate in a sac instead of a succession of joints, it would give a very good idea of the appearance of the cysticercus. The experiments were briefly as follows : A number of dogs were caused to swallow livers (of rats) containing living cysticerci. In the stomachs of the dogs, killed in three or four hours after this scientific repast, the livers were entirely digested, while the heads and necks of the cysticerci were found unharmed, and either retracted within the sacs, or divested of them by the dissolution of the latter. In dogs suffered to live a few hours longer, the cysticerci—minus their sacs—were found in the small intestines. Finally, the remainder of the quadrupeds thus pressed into the service of science, being killed at the end of some fourteen days, contained considerably-developed tape-worms.

Thus is proved the identity between at least one species of cysticerci, and one species of tape-worm, by tracing the development of the former into the latter ; and thus are we enabled to understand the mode of introduction of tape-worm into the bodies of animals.

In relation to the drug "*kousoo*," I have only to refer all inquirers to the last edition of "*Wood & Bache*."

L. PARKS, JR., M.D.

*Boston, January 8th, 1853.*

## SYNCOPE AFTER CHILDBIRTH.

[Communicated for the Boston Medical and Surgical Journal.]

THURSDAY, NOV. 19, 1852.—I was requested to see Mrs. S., in her seventh labor. Nothing unusual occurred, either in its progress or termination. Duration about three hours. After-birth expelled some twenty minutes after the child, with slight assistance. Mrs. S. is corpulent and of lax texture, which, according to the common notion, would predispose to hæmorrhage. About half an hour after the removal of the placenta, the patient appeared to be rapidly sinking, the skin becoming cool, pulse small and weak, countenance pale, &c., asking some one near if it was not night, and saying that the room looked dark—in short, with all the symptoms of syncope. After-pains regular up to the time of fainting, when they became irregular and convulsive. I was very sure, when I saw the woman in such a collapsed state, that hæmorrhage must be the cause; but on examining the uterus through the muscles of the abdomen, it appeared firm and contracted. The vagina at the same time was nearly free from blood. The reverse of this sometimes happens; although the womb seems to be well contracted, the vagina becomes greatly distended with blood, and alarming syncope follows; a condition that every physician of ten or fifteen years' practice has witnessed a sufficient number of times to establish a rule, or at least to cause him to be on the look-out. But in the case under consideration we must look for some other cause, and the question may be asked what was it? Shall we be contented to attribute it to some nervous shock? This, if possible, involves the subject in still more obscurity. Or is it analogous to what sometimes happens after removing a large quantity of fluid in ascites? Or shall we say it is on account of a change in the system? an explanation equal to saying that it is so, because it is. Some of our modern systematic writers, I think Meigs and Ramsbotham, one or both, are among the number who have referred it to the dilatation of the vessels in the vicinity of the uterus, which consequently abstracts an unnatural quantity of blood from distant parts—the brain and other nervous centres in particular; a conclusion which the treatment in the present case corroborates. But if we are not able to describe the correct pathological condition from which the symptoms above referred to result, it is none the less worthy of investigation, considering how suddenly we sometimes lose our patients under similar circumstances—although in the above case recovery took place, and reaction was established in about an hour, the patient several times losing the pulse at the wrist. Stimulants were used, principally brandy and water, alternated with carbonate of ammonia, with camphor friction to the limbs and body, which improved the condition very little. Pressure was immediately made on the lower part of the abdomen, at the same time inclining the bed by elevating the foot, which improved the patient essentially, raising the pulse so as to make it quite perceptible. By changing the position of the bed to its previous state, the circulation at the wrist would be almost imperceptible; and by again inclining it, the pulse would re-appear. The position was thus changed some three times,



while the woman remained in that unnatural condition, which was about one hour. This inclined position of the body, with the head lowest, and pressure as before described, were the only means that seemed effectual in this case.

E. S. DEMING.

*Calais, Vt., Nov. 21, 1852.*

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#### MELANOSIS IN THE HORSE.

BY CHARLES M. WOOD, VETERINARY SURGEON.

[Communicated for the Boston Medical and Surgical Journal.]

IN March last, I was requested to examine a grey horse, with a tumor on the inside of the off, or right thigh, and another within the scrotum on the same side, from which he appeared slightly lame. The tumor on the thigh appeared to partake of the character of a wart; the one in the scrotum, I thought, was probably scirrhous of the spermatic cord. The owner consulted me as to the propriety of having them extirpated. As I considered an operation would be attended with some danger, I advised his continuing his work (which was in a job-wagon), stating that if he was found to be getting worse, I would have no objection to operate on him; but would not be answerable for the consequences that might ensue. I did not see him again for about a month, when he was again brought to me, and in a very emaciated condition, evidently suffering much pain from the rapid growth of the tumors.

The owner now requested me to operate at all hazards. Accordingly the animal was duly prepared, and cast and secured for the operation. On opening the scrotum I found that the tumor was completely enveloped in a sac, composed of cellular membrane, very much thickened, and was firmly attached. I had considerable difficulty in getting to the superior surface; but I excised it, after some trouble, with the loss, to the animal, of about four or five pounds of blood. On introducing my hand into the opening in the scrotum, I could plainly feel another tumor, within the abdomen, and apparently larger than the one I had extracted, which weighed one pound and twelve ounces. As I could, of course, do nothing with this, I allowed the animal to rise. He got up, apparently quite strong, and walked to the stable, a distance of some twenty yards, when he commenced eating. I put up my instruments and casting hobbles, and was about to leave, when the man came from the stable and informed me that the horse had lain down. I went to the stable and found him in that position, and in a few minutes he died, without a struggle. He was immediately removed to the field adjoining; and in making a post-mortem examination, I found within him hundreds of these tumors, of various sizes; some of them as large as a goose egg, and down to the size of a pea. The lungs, liver, spleen, mesentery, kidneys, intestines, and even the peritoneum and pleura, lining the chest and abdomen, were full of them, and there were many dispersed amongst the different muscles. They were of a circular form, of a substance as hard as cartilage, perfectly black, and, by scraping them, you would obtain a black mucus, very much resembling the "nigrum pigmentum"

of the eye. Upon further examination of some of the larger ones, I found that they were composed of a number of smaller ones, from the size of a marble down to a very small pea, and apparently united together by dense cellular membrane. Finding the examination very interesting, I determined on examining the brain, and, strange to say, I found congeries of these tumors, nearly as large as a pin's head, upon the plexus choroides, and in the lateral ventricles.

I could not, however, find anything satisfactory, as to the cause of the sudden death of the animal. It could not have been from loss of blood, as the heart and vessels generally were full. I conclude, therefore, it must have been from nervous irritation and exhaustion.

*Boston, January, 1853.*

#### MEDICAL APPLICATION OF ELECTRICITY.

*To the Editor of the Boston Medical and Surgical Journal.*

SIR,—I wish to communicate, through your Journal, a few thoughts upon the subject at the head of this article.

Dr. William F. Channing, in a small but very valuable work upon medical electricity, has truly remarked that, "The introduction of electricity into medical practice has been made the subject, within a few years, of many empirical treatises. Original and valuable sources of information have at the same time been multiplied, and the European journals, after a long interval, are again filled with cases of the successful application of this agent. Professor Wisgrill, in addressing the Medical Association of Vienna, remarks, that a revolution has taken place in favor of electricity, which, after its wide celebrity at the commencement of the present century, had fallen into disuse, not from the inefficacy of the means, but from the mode in which they were employed. It will be frequently seen, even in successful cases, quoted hereafter, that the nature of the agent and the laws of application have been imperfectly understood; and many of the failures which have occurred must be ascribed to this source."

In these quotations from Dr. C. we have a *text* sufficient for a volume. First, "it has been made the subject of many empirical treatises." This fact has prevented its being employed by many scientific physicians, who would otherwise have investigated its merits, and thoroughly experimented upon its therapeutical effects. There is a feeling, perhaps too general, in the profession, to let any medicine or medicinal agent alone, when it has been generally taken up by irregular or empirical practitioners. This should never be the case. The *true eclectic* physician employs, in turn, any and every means of restoring lost health, by whomsoever it might have been discovered, or afterwards used. It is undoubtedly true that multitudes of little or no medical or physiological attainments have taken up this subject, and written upon it, even flooding the land with their books. Still, many scientific men have put their pens to it, and sent forth much that is truly valuable; among whom may be named Drs. Wilson Philip and Golding Bird.

Second. "It failed not for want of efficacy in the means, but from want of knowledge to apply it." While the most ignorant have, doubtless, met with some success, it has more often, when ignorantly applied, utterly failed. This has been the occasion of its failure, in all probability, in nine cases out of ten, where failure has followed its application. I have myself seen an operator apply the magneto-galvanic current, to *stimulate* a nerve, in an opposite direction from that recommended by Matteucci. Of course, he failed to *excite* the nervous energy.

Another cause of its failure has been in the fact, that by this class of operators it has been invariably used *alone*; not as an *auxiliary* to medicine and therapeutical skill, but as a *sole* recuperative agent. It will be readily seen, by every intelligent physician, that in most cases such an application of electricity would fail. Other treatment was necessary, in conjunction with this. If this "bow is drawn at a venture," and the electric current sent, *pell-mell*, in the right or wrong direction, towards the centres or ramifications of the nerves, or not touching them at all, and irrespective of *quantity* or *intensity*, as the *hobby hydropathist* sends his stream of water, it is to be supposed that the operator would *sometimes* hit right; but far oftener *wrong*, or *not at all*.

I may add, the whole value of electricity, as a medical agent, depends upon a correct diagnosis of the disease, a proper degree of quantity and intensity of the agent, and its application in the right direction. It should be expected, when applied under these circumstances, to exert a great effect, as a medical agent. How can it be otherwise, when it is acknowledged, by many of the most intelligent physiologists and physicians, to possess a vitalizing and re-active power, an a'terative and sedative action, and to promote secretion, absorption, nutrition and capillary circulation. It has been employed successfully in a host of ailments, quite too numerous to be named in this place. The more we study into the philosophy of the electric fluid, and the more we apply it therapeutically to diseases, the more we shall be convinced of the truth of the following declarations of Dr. Philip—"We have seen that galvanism is capable of performing all the functions of the nervous power, properly so called. I have repeatedly seen from it the same effect, when applied to the digestive organs and liver, or biliary system, which arises from calomel; a copious biliary discharge from the bowels coming on a few hours after its employment."

I have been in the habit of employing this agent, as an auxiliary to other medical treatment, in a large variety of diseases, for several years, and with marked success. In the treatment of many cases I would be very unwilling to dispense with its use. I feel well assured that I could not find an equally efficient substitute in the whole range of medical appliances.

Two cases have recently come under my treatment, in which this agent has seemed to be very serviceable. The first, an elderly lady, with a chronic affection of the fingers, but not of very long standing. Upon one hand the fingers were stiff, and considerably swollen. The magneto-galvanic current was applied, for about twenty minutes, each day, for ten days, when the stiffness and swelling were mostly gone. She soon entirely

recovered. Other remedies were combined with the use of the machine, but I ascribed the subsidence of the disease chiefly to the electro-galvanic current. The other was that of a young lady with a morbid affection of the eyes. They were very weak, sometimes inflamed and painful. She had been for some time under the care of a very respectable and skilful physician. But still her eyes grew no better. The other treatment which I employed was very ordinary, and I have no reason to suppose it was any better than she had previously received. But I applied the electric current, which remedy she had not previously had. It was administered within the orbit of the eye, and to the ophthalmic branch of the fifth pair of nerves. She expressed herself as relieved at the first sitting, as soon as the sponge was removed (for it was applied through a soft sponge moistened with rose-water). She has wholly recovered under the application, and ascribes her cure entirely to electricity.

While I would be far from making this single branch of medical treatment exclusive, or elevating it above all others, I am constrained to add that its virtues have grown in my estimation, year by year, as it has been medically applied. A sufficient number of well-authenticated cases of recovery under its employment are already before the public, or, rather, the medical profession, to warrant a thorough trial with it in paralysis, partial or total amaurosis, neuralgia, epilepsy, chorea, rheumatism, in the wide range of urinary and uterine diseases, constipation, colica pictorum, general debility, coldness of the extremities, aphonia, and paralysis of the visual and auditory nerves. In narcotism, cases of drowning, and exhaustion from flooding, its use should never be forborne. It no doubt sometimes fails; and what medical treatment does not? Misapplied, like all other active medical appliances, it sometimes does injury; but what medical man would reject a valuable remedy because, when unskilfully used, it did harm? If we were to do this, we must give up every medical agent of the *materia medica*. Matteucci has shown that the nervous power may be wholly exhausted by an excessive use of electricity. So it may be by an excessive use of the best medicine now known. But "*wisdom is profitable to direct, et verbum sat sapienti.*"

W. M. CORNELL, M.D.

Boston, January, 1853.

#### VACCINATION AT COUNCIL BLUFFS.

[DR. CLARK, of Iowa, furnishes us the following interesting and important facts respecting the practice of vaccination at the West.]

During the spring of 1850, smallpox made its appearance at Kanesville and Council Bluffs, creating much alarm among the thousands of Oregon, California and Utah (Salt Lake) emigrants congregated in this vicinity, preparing for their long journey. There were several cases of confluent smallpox among the emigrants, and one or two of variola among the citizens, before the resident physicians were aware of its existence in the vicinity. At a special meeting of such of the physicians

as could be collected together, it was determined to prevent the spreading of the disease by vaccinating all emigrants, citizens, and the Indian tribes belonging to the Council Bluffs Indian sub-agency; which was no small amount of labor—there being probably five thousand emigrants, as many or more citizens, and some three or four thousand Indians on the Nebraska side of the river. The physicians went from house to house, from tent to tent, vaccinating all who were unprotected. The missionaries—kind, generous men—at the Omoka and Pawnee Missions, assisted me. We vaccinated some two thousand children and adults, all that we could persuade to submit to the operation. The result crowned our efforts with success. Only two fatal cases of smallpox occurred among the whites, and some half a dozen among the Indians. The progress of the disease was effectually checked, and the alarm and fear of this dread epidemic dispelled.

These cases may be added to those already accumulated, showing the vast amount of good conferred on mankind by the discovery of Jenner, and constitute another conclusive evidence of the fact that if people will adopt the prophylactic course advised by the faculty, this disease will not become epidemic even in localities where every circumstance tends to promote it, as was the case at Council Bluffs and Kanessville at this period.

The red men duly appreciate the benefit of vaccination. Chocopee, the chief of the Ottes, at that time ordered his *braves* to bring to the Mission House all the squaws and children; and every year since, when the emigrant wagon makes its appearance on the banks of the Missouri River, the chief of the tribe orders the vaccinating process to commence.

#### ON HOMŒOPATHY

[Communicated for the Boston Medical and Surgical Journal.]

THE homœopaths, being satisfied of the truth of the doctrine of *similia similibus curantur*, and of the "tremendous potency" of infinitesimal doses, have nothing to do but to experimentalize with various drugs, to ascertain their effect upon the healthy economy. This they have affected to do, and their published results are most entertaining. But for full particulars we refer to Jahr's *Manuel of Homœopathic Medicine*, and to Dr. Wood's *Homœopathy Unmasked*. We cannot refrain, however, from narrating a few symptoms, "the undoubted effects of infinitesimal doses."

We have all partaken of salt; but does our experience of its effects confirm the experiments of homœopaths? According to them it produces, and therefore cures, an immense variety of symptoms; some of which (for we can't stop to mention all), are "great wasting of the body," "continual shivering," "palsies," "eruption on the skin," "melancholy sadness, with abundant weeping," "hatred of those from whom injuries have long ago been received," "irascibilities and violent rages easily provoked," "desire to laugh," "weakness of memory," and "excessive forgetfulness," "the experimenter blunders in speaking

and writing," "falling out of the hair, even of the beard," "ulceration of the chin," "loss of appetite, especially for bread," "repugnance for tobacco-smoke," "warts on the palms of the hands," &c. &c.

Another substance with which most, if not all, of us have experimented upon ourselves, is nutmeg. But according to homœopathy nutmeg produces "bloody perspiration," "a constant flow of facetious ideas," "a strong disposition to make a fool of everybody," "idiocy and madness," shortness of breath," "contraction of the throat," &c.

Lady Bountifuls and "old maids" are fond of giving people camomile tea; but do they know what symptoms camomile produces! "Cataplexy," "epileptic convulsions, with retraction of the thumbs," "a disposition to weep and utter lamentations, with great readiness to take offence," "taciturnity and repugnance for conversation," "music is insupportable," "nostrils ulcerated," lips ditto," "toothache, with pain so insupportable as to drive to despair," "the tongue moves convulsively," and "the head is twisted backwards."

To refute such nonsense as all this, would be an insult to the understanding of all sensible people. Homœopathy is, in fact, only a new name of what has long been known and practised by the regular profession, as the expectant plan of treatment; which consists in standing by and watching the patient, while nature, assisted by an infinitesimal, overcomes the disease; for their minute doses, as they have no visible, or chemical, existence (nothing being detected in a globule save sugar), can have no effect whatever upon the physical system, in a physical or natural way. That their small doses, however, in some cases have a powerful influence upon disease, by influencing the imagination, there can be no doubt.

All physicians and metaphysicians agree on this point, that the imagination has an important agency both in the production and cure of disease. The mind and body are so intimately connected and associated that they mutually affect each other. To give many illustrations of the effect of the imagination, would exceed my space, but one or two we will find room for.

When the powers of nitrous oxide or "laughing gas" were discovered, Dr. Beddoes imagined that it might be useful in chronic paralysis. Accordingly a man affected with this disease was procured, and Sir Humphry Davy was requested to make him inhale the gas. But previous to this, a small thermometer was inserted under his tongue, to ascertain his temperature, with a view to comparing it with that after the inhalation had been begun. The patient was quite ignorant of the process to which he was to be submitted, but was firmly impressed with the idea that it was to cure him. And no sooner was the thermometer placed under his tongue, than he declared that he felt already its benign influence throughout his whole system. This was too tempting an opportunity to lose; so nothing more was done to the man except applying the thermometer, which was repeated every day or every succeeding day for a fortnight, and the man gradually recovered his health.\*

Another very striking experiment might be mentioned, which was

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\* Dr. Paris's Pharmacologia.

tried with some murderers in Russia, since cholera times. They were placed first in beds in which persons had died of the cholera. But they did not take the disease. They were then put in beds that were new, and had not been used at all, but they were told that they were in beds in which persons had died of malignant cholera. Nevertheless, three out of four of them died of the disease in question within four hours.\*

The secret, then, of the success of the homœopathic practice, consists, in the first place, in the efforts of nature (which we know are sufficient to the cure in most cases that physicians are called to); secondly, in the influence of the imagination; and thirdly, in the peculiar kind of diseases which they are generally called upon to treat, of which we will presently speak.

The fact that minute portions do great cures, or rather that cures take place under the employment of minute doses, only teaches the regular practitioner the importance of thoroughly understanding his profession—the mental as well as the physical constitution of his patients, so that he may be able to tell, with some degree of certainty, whether it be the mind or the body of his patient that needs his medicine; or whether both or neither require it.

The most scientific men of the age (physicians) think that too much medicine has generally been given to the sick. And why? Simply because a large proportion of the diseases for which physicians are called upon to prescribe, have been imaginary, or merely functional, and not organic in their nature; diseases which belong rather to the movements of the vital machinery, than to its separate organs. For instance, a clock or a watch may be perfect in all its wheels, and yet fail to mark the time accurately, because it is not well regulated. So the human system may be sound and entire in all its parts, and yet its healthy functions may be so deranged as to render the patient really ill. Now what does such a man need? Does he need active medicine? Certainly not. But simply the advice of some competent physician, who, if competent, and an honest man, will prescribe, perhaps, a change of diet, a change of place, new objects of attention, increased exercise of both body and mind; after which, if the above does not succeed in perfecting the cure, or in conjunction with the above, he will prescribe a placebo, which after all may do the patient as much good as the strictest observance of the whole catalogue of hygienic rules. I think no one will doubt that such cases as these do frequently occur.

The existence of this great class of merely functional diseases, gives the homœopathist his wonderful success. But the homœopaths contend that all cures result from the use of their infinitesimals, or at any rate their patients are left to that inference. One event follows the other in the order of time, and the inference is that the consequent was the effect of the antecedent; and this kind of reasoning is the great stumbling block of all ignorant men.

"By education most have been misled,  
So they believe because they were so bred."

So it is with at least the majority of the people of these United States.

\* We state this on the authority of the London Medical Times.



Their education on such matters has been in perfect keeping with this kind of reasoning, an example of which is to be seen in the case of the Irishman who applied to his physician for a prescription for his wife. He was ordered to apply a blister to the chest. Pat having no chest in the house, applied it to the lid of an old trunk, and the wife happening to recover, was of course ready to certify to the efficacy of the application. The history of charlatanry is full of just such facts. Did any sane man ever persuade himself that the efficacy of a medicine is increased precisely as its quantity is diminished? that the smaller the dose, the more potent in its influence? If the doctrines of the founder of homœopathy be true, an ounce of opium would convert all the water in the Atlantic into an excellent soporific mixture. We will close by saying that we believe as much in the efficacy of a blister when applied to the lid of an old trunk, as in the administration of truly infinitesimal doses.

H. M. ADAMS, M.D.

Hallowell, Maine.

#### LONDON MEDICAL CELEBRITIES.

[In the following extract of a letter from London, the individual peculiarities of some of the leading medical and surgical men in that city are humorously illustrated. It will be read with interest by many on this side the Atlantic, who are familiar with the characters of the men alluded to.]

SIR BENJAMIN BRODIE is the most learned man in the profession in London, but the man who has most enemies; Mr. Lawrence, perhaps, the most friends, without any boasted learning. Mr. Guthrie has done more for military surgery than any man who ever lived, and should now be at the head of the medical department of the army; but like Rory O'More's dreams, all our medical appointments here "go by contraries." The square pegs are ever getting into the round holes, and the round pegs into the square holes. Dr. Marshall Hall has been laughed at and ridiculed till it no longer "pays;" but his name is now known through the world, and his reputation, if he will only guard it safely, quite equal to Sir Charles Bell's. Men of a certain class deny any force to the excito-motor system of nerves, as Marshall Hall has not given a map and an anatomical description of them. The spiral cord is, no doubt, the centre of these actions. These men wilfully overlook the fact, but were poor Hall to have written from the swamps of the Lower Rhine, or from Vienna, and have a name no one could pronounce, the booksellers' shelves would groan with his discoveries. Mr. Skey is another of the hard grains of our Christmas fruit; few men of the present day, however, can boast of such a strong masculine intellect. Sitting at the feet of his Gamaliel, whom he half worships (Sir Benjamin Brodie), the combined wisdom of these two great men is something indeed to think of. Mr. Skey laughs at all authorities of the olden time. Mr. South, on the other hand, with his placid mien and hair parted like a woman's, would frame and glaze the washing bills of the ancient surgeons; would revive *queues*, perpetual pills, red-hot amputating knives, and Ambrose Paré.



Some of the men here (the discordant elements of London medical practice) are perhaps not less singular in their characteristics. As we may not have another opportunity of serving up our currants and raisins again, we may speak of them. A dash of sugar is required, but then there is Mr. Lawrence; a little suet shredded fine, Dr. Ramsbotham; Alfred Snee, and a few fat general practitioners, cut up small; a piece of mistletoe is wanted of course, to stick a-top of our pudding, under the beamy smiles of which we may all love and greet each other, Professor Owen; some thorns to put under the pot, when we have procured a pudding-bag—thorns crackling as is the manner of fools according to high authority, the homœopaths. With a little unanimity and honesty, this desirable consummation might be achieved. A little spirit to burn under the dumpling from the bitter beer testimonials and some of our useless museum preparations. We would wish a place for our prescribing chemists, but it would be very near the thorns under the pot. Then there are others which in time will also prove useful, one way or another. Mr. Coulson, if he would only not aspirate his vowels, invulnerable on the subject of lithotomy and lithotritry; Bence Jones, at St. George's, who would turn everybody's brain he talks to into sulphurets and phosphates; Dr. Robert Lee, from the wintry side of the Tweed, old fashioned, but marvellous in industry, with one arch enemy, Dr. Snow Beck, and one abiding fancy, uterine diseases; Locock, stern and unbending in practice; Bennett, fanciful, ever dreaming of the speculum; Golding Bird, insinuating, sharp, and puritanical, goes to church only five times on Sunday, but not to be approached as a good physician, especially in children's diseases; Fergusson, need we say, the *beau ideal* of a surgeon, simple, kind, and gentlemanlike, without humbug; Bransby Cooper the same; Babington, Addison, and Watson, the great pillars of medicine in England, without whom it would all tumble to the ground; Copland, not much known, but indefatigable, like the "busy bee," improving "each shining hour," &c.; at Bartholomew's, Lloyd, one of the "illustrious unknown," preferred by his friends to poor Sam Cooper as surgeon to that institution; Paget, the rival for Skey's place; and Skey, adored and envied by every one: these all, no doubt, will be found in time among our "representative men"—when some connecting influence is discovered to bring together all the good men in London now sadly distracted—when nepotism, practising chemists, and genteel starvation are at an end—when the College of Surgeons, like the *Ichthyosaurus* or *Dinornis* is reconstructed and remodelled—when the College of Physicians is no longer like a set of genteel catacombs, but common sense and proper professional thinking the rule of life most tolerated and valued.—*Dublin Medical Press.*

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#### LEPROSY IN NORWAY.

[WE find in one of the religious papers a letter dated Bergen, Norway, Sept. 20, 1852, addressed to the Rev. Dr. Wainwright, of New York, and containing an account of the leprosy as seen by the writer in that

country. The late volumes of this Journal have contained descriptions of this ancient disease as it now exists in Syria and Palestine, and the letter alluded to is a suitable accompaniment to them. We therefore copy it in full, with the regret, however, that we are unable to give the name of the writer.]

It will probably surprise you to learn that the Oriental leprosy, as described by Moses and healed by our Saviour, exists at this moment in Norway. It is not an hour since I have seen over a hundred cases of this frightful and loathsome disease, which is here exactly the same that you found at Nablous and elsewhere in Palestine, and described in your "Pathways and Abiding Places of our Lord." This disease formerly existed in England and France, whence it was finally extirpated by the most severe and tyrannical regulations, such as can never be enforced in our day and country. Every person, without exception, that was afflicted with leprosy, was brought into a public "leprosy house," and, as the disease is not contagious but hereditary, it was thus almost, if not entirely, rooted out of those countries. It was originally brought into France by pilgrims, who had intermarried in Palestine; and, in the ninth century, it was carried into Norway, after the excursions of the Northmen into Normandy; for these countries seem to have been more closely connected in ancient times than in our own.

That the disease has been imported is evident, from the fact that it chiefly exists upon the Western Coast, bordering upon the North Sea, and extends along the whole line of it, from the Naze to the North Cape. After more than eight centuries, however, it has begun to penetrate inland, by the deep fiords and gulfs which sometimes indent the Western Coast of Norway, for a distance of between one and two hundred miles. It is now sometimes found far in the interior, but never in the Eastern part of this country, nor in Sweden. Iceland was entirely depopulated by the plague, and recolonized from Norway, and there the disease exists.

The government have at length taken the matter in hand, and in addition to a "leprosy house," which has existed for five hundred years, and now contains over five hundred and thirty-five patients, they have recently built a hospital, *the first that the world ever knew* for the cure of leprosy. It has been only three years in operation, under the management of Dr. Daniellssen; and this gentleman believes that he has succeeded in curing lepers, the first that have ever been cured by medical means. He has analyzed the blood of the diseased persons, and finds it to contain too much albumen and fibrin matter, and of course directs his efforts to the removal of the excess. He has published a scientific work, with plates, in the French and Danish languages. The institution is well provided with fresh and sea water, and vapor baths.

I have to-day seen a number of his patients whom he considers nearly cured, and those who have been sent home are going on well. He estimates the whole number in Norway at three thousand, and says it is increasing, and would have been much larger but for the character of the country. I have just travelled across Norway, and it is one great mountain or rock, with fruitful crevices rather than valleys, not *one hundredth*

part of the whole surface being under cultivation ; it is by far the most thinly inhabited country I ever visited. The people dwell so far apart, that the disease has spread itself but slowly. Yet the increase has aroused the Storthing, or Norwegian Congress, to grant 35,000 species (\$37,000) toward building a third hospital in Bergen. This is a very large sum for a country like Norway, and the results of Dr. Daniellssen's experiments are looked for with the greatest anxiety, as the disease is considered a great national calamity.

But the point to which I wish to call attention is this. In some places on the Western coast of Norway the number of lepers among the people is nearly one in fifty, and it is precisely from the Western coast *that the increasing emigration to America takes place.* Dr. Daniellssen says that he is certain that the disease will show itself among these emigrants ; for he knows leprous individuals who have gone to the United States, and one in particular, quite recently, whom he endeavored in vain to dissuade, and in whom the disease was only beginning to appear. Now, though it is never contagious, it is always, and without fail, hereditary, and if there is the least spot in either of the parents, it is absolutely certain to appear in the descendants, though, like other hereditary affections, it often passes over one generation. Owing to our larger and increasing population, it will spread much more rapidly in America, and may become a prevalent disease in our Western States. But as yet it is comparatively in our own power ; for most of the Norwegians are settled together, and almost every case might now be found.

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#### ON THE INFLUENCE OF POSTURE IN THE TREATMENT OF EPILEPSY.

BY MARSHALL HALL, M.D., F.R.S.

WE have only to raise one hand and arm high above the head, and allow the other to hang down, for a minute or two, and then bring the hands together and compare the syncopal condition of the former with the apoplectic condition of the latter, to form an idea of the influence of posture in the treatment of diseases consisting of affections of the circulation, especially that of the head.

I believe ordinary syncope may pass into fatal sinking if the raised posture be continued.

I believe that simple apoplexy may become deeper and deeper, simply from the opposite course of retaining the patient in the recumbent position.

Sleep, which is a sub-apoplexy, may pass into epilepsy or apoplexy, solely from the fact of a recumbent position. As a preventive of epilepsy and apoplexy during sleep, it is of the utmost moment that the patient should habitually repose with the head and shoulders much raised. For this purpose both bed and mattress should be raised by means of a bed chair, or triangular cushion, and the patient be prevented from gliding down in the bed by means of a firm bolster, four inches in diameter, placed under the sheet, under the front of the ischia. The trunk should be raised to an angle of 45 deg. or 50 deg.

In this manner the encephalon will be less oppressed with blood, the sleep will be lighter, the disposition to epilepsy or apoplexy will be diminished. This should be the patient's habit during the rest of life.

There are two other circumstances in which attention to posture is most important.

The *first* is the condition of the patient after certain fits of epilepsy, the respiration being impeded by rattles in the throat. The posture should be much raised; but besides this, it should not be such that the saliva may *fall* into the fauces. The stupor and insensibility prevent the patient from swallowing. The saliva, therefore, if a just position be not adopted, accumulates and falls into the fauces, and a throat-rattle and dyspnoea, painful to witness, and dangerous to life, are the consequences. The posture of the patient should be such as to allow the saliva to flow out of the corner of the mouth. In one case such a change of posture relieved the patient immediately.

The *second* case requiring extreme attention to the posture of the patient is that of *syncopal epilepsy*, or that form of epilepsy in which there is ghastly pallor of the countenance and other signs of syncopal affection. The patient should be placed with the head *low*. If this be not done, the syncope may be speedily fatal, an event which actually occurred in an interesting case a few days only ago.

The patient was none other than Ann Ross, on whom Mr. Anderson had performed the operation of tracheotomy. Her fits had changed from those of the *epilepsia laryngea* to the abortive form. The reader may remember that the patient's age was thirty-six; that her case was hereditary, her father having been epileptic; and inveterate, her fits having recurred during twenty-four years; and that she herself was thin and pallid. She was seized with syncopal epilepsy; was laid on the bed and expected to recover as formerly; was left; and was at length found to have expired! A low position and proper attention might have saved the poor creature's life.

I need scarcely observe, that what I have said of epilepsy applies to many other diseases. It is the *principle* of position which I wish to enforce; a principle, the importance of which I believe to be still greater and still more extensive in application than is generally imagined.—*London Lancet*.

## THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, FEBRUARY 9, 1853.

*Institutions for Idiots.*—Philanthropy never lacks for objects over which to spread its broad mantle, in Christian countries. The insane, the maimed, the halt and blind, the orphan, and decrepid age, are provided for by the broad-cast charity of the world, notwithstanding the popular doctrine that it is a hard-hearted and selfish one. But there was one neglected class, whose claims either escaped observation, or have always been unwillingly

recognized, till a humble individual in the Alpine fastnesses of Switzerland, whose mind embraces thoughts as grand as the mountain scenery by which he is surrounded, developed a new idea, and idiots began to have their wrongs unfolded, their neglected condition narrated, their feeble bodies cared for, and their imperfect glimmerings of reason guided by his genius. This was but an experiment, but it is now acknowledged to have been successful, and idiots are hereafter, while civilization endures, to have their share of the world's sympathies and bounty. Dr. Guggenbuhl, of Adenburgh, on the top of a vast mountain, three thousand feet above Interlaken, and under the frowning brow of the Joun Frau—a snow bank towering to the sky—is quietly carrying on the laborious occupation of developing the feeble intellect of idiots. He seeks no applause, covets no renown, and yet distant nations relate his achievements for humanity. All other schools organized for the instruction of this unfortunate class of children, either in Europe or America, are but imitations.

This brings us to the consideration of an often propounded question, what is doing in New England, or the United States in general, for idiots? Massachusetts appropriates, annually, a specific sum for carrying on a course of systematic discipline and instruction; and New York State has organized a State Institution for the same very benevolent purpose. Beyond these, we have no knowledge of any public efforts, in this direction. There is one private asylum, under the care of Dr. Brown, at Barre, Mass., distinguished for its good order and training, at which parents and guardians may place unfortunate children of this description, with the certainty of having them kindly treated.

An important query, in connection with this subject, deserves attention. Is there any period when a pupil can leave the idiot school and return home, so elevated and instructed, that his habits of cleanliness and deportment may be considered permanently established, and a course of personal industry and propriety expected? Our own observations, made on a visit to Dr. Guggenbuhl's establishment, led us to the conclusion that in the most favorable cases, the children require the vigilant attentions of instructors, to keep them up to a point of propriety necessary to make them tolerable in a family. An institution, therefore, should rather be designed for their constant home, than as a hospital for cure or a temporary residence. No efforts, however well directed or persistent, can change the organization of the cranium, or create in the brain organs which are missing. The process of developing suspended powers is a tedious one, and the laws by which it is accomplished seem to be imperfectly known. Still, since nothing is really impossible in regard to the progress of knowledge, subsequent ages may greatly advance upon the present limited attainments of physiologists and phrenologists, in the management of idiots.

With these views, it strikes us that it would be an act of sterling benevolence, and in accordance with Christian legislation, to have State Asylums for these unfortunates. The number of idiots in Massachusetts is much larger than is generally suspected, and many of them have poor parents, who are unable to provide for their every-day necessities. A public establishment would ensure comfort and order, and some degree of moral culture, and relieve those who are not able to bear the burden of maintaining them. If the incurable insane are thus furnished a home for life, it is equally imperative that idiotic children should be looked after. A house and grounds, somewhere in the interior, would not be expensive, and the propriety of the step would hardly be questioned even by the sturdiest political grumblers in the land.

*Longevity.*—Some men live longer than others who are exposed to the same circle of influences, and whose bodies are nourished by the same kind of food. Neither regimen, therefore, nor the mental or physical activity of individuals, can alone very essentially modify the length of days of any one. The world abounds with persons who have battled with the elements, with poverty, hunger and oppression, and are still fighting their way in extreme old age, vigorous as ever. Donald McDonald, at the age of one hundred and seven, some years since, was sent to the House of Correction, in Boston, for being quarrelsome and a drunkard. And yet we are accustomed to speak of the hardships that abridge life. On the other hand, thousands who walk with the utmost propriety, violating neither physical nor statute laws, die long before reaching their three score and ten years. The quakers, in their extreme moderation and subjection of the passions, are selected as eminent examples of long life, the result of personal training in virtue, temperance, and honesty. But longevity is not exclusively their lot. On the deserts of Arabia, near the borders of Palestine, old, dried-up specimens of humanity are numerous, who have smoked, drank strong coffee, and played the robber, yet have passed through more than one hundred and twenty years, without a day of indisposition, without the loss of a tooth, a dimness of the eye, or an abatement, as it was said of Moses, of their natural forces. Where, then, shall the medical philosopher look for the causes of longevity, or those of premature death?

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*Carpenter's Physiology.*—The new and enlarged edition of this work gains upon the reader at every fresh perusal. Limited as man's acquaintance is with the laws of life, it is both gratifying and instructive to contemplate, in a work like this, the immense labor achieved, and the knowledge gained, by modern physiologists. They have narrowly studied each and every function within their ken, and so closely interpreted nature, that if they have failed on some points, in others nothing has escaped them. The nervous system is now the field for exploration. Those slender white threads, creeping along the muscles; the spinal cord; and, lastly, the brain, even with the flood of light that has been thrown upon its organization, still put the anatomist at defiance, and perplex the physiologist, notwithstanding the aid derived from microscopical research. Dr. Carpenter is in no way behind the age, and his book certainly embraces all that is really known as physiological truth. Rich as our libraries are in researches connected with physiology, this colossal volume from the Philadelphia press should be added.

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*Introduction to Clinical Medicine.*—A small volume, embracing six lectures, on the method of examining patients; percussion and auscultation; the use of the microscope, and the diagnosis of the skin, by John Hughes Bennett, M.D. &c., Professor of the Institutes of Medicine in the University of Edinburgh, has been received direct from the Scotland publishers, Messrs. Southerland & Knox. This is the second edition, improved, which we trust will be published here, because it is precisely the kind of work to be purchased. There are some good wood engravings, which very much assist the student in his examinations and explorations. It would be an idle expenditure of time to comment on any production from the pen of a man like Dr. Bennett, whose reputation needs no prop in any country where medicine is taught. When a treatise has been the

## *Medical Intelligence.*

subject of examination by us, we like to inform the reader where copies of it may be had, especially if it possesses the weight of character and utility which belongs to this; but, unfortunately for the profession, Dr. Bennett's work is not yet to be had in America, though it should be reprinted by some of the enterprising houses engaged in medical printing.

*Medical Miscellany.*—George Cleney lately died near Germantown, Ohio, at the age of 105 years and 17 days.—A new medical college edifice has been commenced at Charleston, S. C.—Dr. S. Hume, of Lancaster, Pa., who died lately, bequeathed \$2000 towards erecting an asylum for the reformation of drunkards.—Louis Derby died at New Orleans, at the age of 120 years, on the 2d of Jan. He was a native of Africa.—A strange disease is reported to be doing the work of death at Galena, Illinois, and at Dubuque, Iowa.—Dr. John S. Butler, physician of the Retreat for the Insane, at Hartford Conn., sailed recently for Europe, being in ill health, and unable to attend to his official duties.—Dr. Redfield has been lecturing in New York on physiognomy, with illustrations.—According to the official returns, twenty-six hundred and fifty persons died of cholera at St. Jago, Cuba, in October, November and December last, out of a population of 30 000 to 35 000 souls. During the height of the pestilence, a terrible earthquake occurred, which destroyed many of the best buildings in the city.—The New York Tribune says that David E. Buss, the young medical student who was stabbed by his room-mate and fellow-student, Wm. Erwin, on Tuesday afternoon, still lies in a critical situation at his boarding-house. The difficulty is said to have grown out of a dispute relative to the ingredients necessary to the compounding of a certain medicine.—Dr. Geo. W. Kittredge, of N. H. is nominated for Congress in that State.—The Suffolk District Medical Society continues to meet the last Saturday of each month, in Boston, at the Masonic Temple.—The cholera was raging dreadfully at the last accounts from Persia. One thousand deaths occurred daily at Tauris.—A homœopathic hospital is to be opened in London.—The Legislature of Alabama has passed a law requiring all homœopathic practitioners of that state to possess a diploma from a homœopathic college, —or they will not be considered regulars.—The deaths in London for the week ending Dec. 11th, were 1012—only two of them by small-pox

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MARRIED.—Samuel Fulton, M.D., of Pontiac, Michigan, to Miss H. C. Fisher.

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DIED.—At Astoria, N. Y., Dr. Junius Smith, the first to introduce the growing of tea in America. He was a man of great energy and enterprise.—At New York, Walter Jardine, Esq., an English surgeon, by suicide, growing out of extreme poverty and destitution, 35.—Dr. Charles Chandler, of Andover, Vt., 81.—At Charleston, S. C., of yellow fever, Dr. John A. Cleveland.—Mr. Alex. Walker, the ingenious author of a work on the "Nervous System," and others on "Beauty," "Woman," "Intermarriage," &c., which displayed much original research, died at an advanced age at Leith, on Tuesday, December 7th.—At Old Aberdeen, Dr. Rodrick M'Leod, late one of the physicians of St. George's Hospital.

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*Deaths in Boston*—for the week ending Saturday noon, Feb. 5th, 91.—Males, 35—females, 56. Inflammation of bowels, 3—congestion of the brain, 1—consumption, 20—convulsions, 2—croup, 4—cancer, 1—dropsy, 1—dropsy in heart, 3—debility, 1—infantile diseases, 6—puerperal, 2—erysipelas, 1—typhus fever, 1—typhoid do., 2—scarlet do., 21—hooping cough, 1—hemorrhage, 1—disease of the heart, 1—inflammation of the lungs, 7—congestion of the lungs, 1—disease of the liver, 1—marasmus, 3—old age, 2—pleurisy, 1—scrofula, 2—teething, 1—worms, 1.  
Under 5 years, 44—between 5 and 20 years, 15—between 20 and 40 years, 16—between 40 and 60 years, 8—over 60 years, 8. Born in the United States, 74—Ireland, 15—British Provinces, 1—Germany, 1.



*Veratrum Viride*, as an Arterial Sedative. — Dr W. C. Norwood, of Cokesbury, S. C., has been very successful in the use of the American hellebore in various affections requiring a diminution of the heart's action. Two extracts are given below, from a paper of his lately published.

"Called, in February, 1847, to see a son of Mrs. T., laboring under a violent attack of pneumonia, we put him on the use of *veratrum viride* every three hours. Although 12 years of age, his general slender health and deformed chest, having been severely afflicted with asthma, induced us to commence with a very small dose, that we might avoid any drastic effect of the remedy. The first portion given was two drops, to be increased one drop every portion until the slightest nausea was experienced, then to lessen or discontinue the remedy, as the case might require. On taking the third or fourth portion, Mrs. T. discovered that he was getting very pale, that the skin was cool and moist, and pain scarcely felt only on taking a full inspiration. The slowness of the pulse and the pallor and coolness of the surface alarmed her, and she sent for us. We found him pale, cool, moist, and with a pulse beating 35, full and distinct. When put on the tincture, in the morning, his pulse was 120 to 125, skin hot and dry, frequent and labored breathing, pain severe, great thirst. In the short space of twelve or fifteen hours the symptoms were subdued, and by continuing the tincture in doses of from two to three and four drops, there was no renewal of the symptoms."

"In 1851 we first entered on a trial of the tincture of *veratrum viride* in the treatment of typhoid fever. It was due to our patients and to justice that we should proceed with caution. We accordingly, at first, gave it in mild and moderately severe cases, avoiding its use at first in all cases of unusual severity and malignancy. We first used it in the case of a negro boy of Mrs. W., which was uncomplicated and yielded readily. When called, on the third day of the disease, the bowels had been moved sufficiently by a cathartic of calomel, followed by repeated portions of camphorated Dover's powder, without abatement of the symptoms. The skin was hot and dry, great thirst, severe pain in the forehead; the eyes dull, heavy and ecchymosed; tongue covered in the centre with a dark, thin fur, tip and edges very red and dry; pulse 127, small, soft and with quickness in the stroke, that indicated greater frequency than really existed. The patient was ordered a 6 drop dose, to be increased till nausea or vomiting occurred. By mistake the dose was not increased. After continuing the treatment twelve hours, there being no abatement in the symptoms, we were notified of the fact and wrote to increase until an impression was made, and that we would see the patient in twelve hours. During the absence of the messenger, Mrs. W. discovered that the dose was to be increased, and did so, and when this reached eight drops there was free vomiting, with a subsidence of all febrile symptoms, the severe pain in the head excepted. At the expiration of twelve hours, we found the boy with a skin cool and moist, thirst materially abated, and the pulse reduced to fifty-six beats. A blister was applied to relieve the unmitigated pain in the head, and the *veratrum viride* was continued four days without any return of the symptoms." — *Southern Med. Journal*.

*Loose Sleeves of Ladies*. — A celebrated German physician is about to publish, in Berlin, a scientific condemnation of the present loose sleeves worn by the ladies. He proves that they promote rheumatism and all kinds of complaints, and recommends a return to the long and close sleeves of a former period.